

FERENCE & ASSOCIATES LLC
Amendment Transmittal

Atty. Docket No. YOR920020357US2
(590.103)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Adams, Jr. et al.
Serial No.: 10/539,890 Examiner: M.M. Patel
Filed: March 16, 2006 Group Art Unit: 2178
For: SYSTEM AND METHOD FOR ANNOTATING MULTI-MODAL CHARACTERISTICS IN MULTIMEDIA DOCUMENTS

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

1. Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.
- OR
2. In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
 3. Small Entity status of this application has been established by a verified statement previously submitted.
 4. A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF TRANSMISSION

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being transmitted by EFS-WEB on January 16, 2009 to the Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Stanley D. Ference III
(Type or print name of person mailing paper or fee)

(Signature of person mailing paper or fee)

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5. Also enclosed: _____
6. No additional filing fee is required.
7. The filing fee has been calculated as shown below:

	Claims Remaining After Amendment (Col. 1)	Highest No. Prev. paid for (Col. 2)	Present Extra (Col. 3)	x	RATE	=	FEE	OTHER THAN A <u>SMALL ENTITY</u>	RATE	=	FEE
Total Claims	20	-	** 20	= * 0	x \$26	=	O R	x \$52	= 0		
Ind. Claims	3	-	*** 3	= * 0	x \$110	=	O R	x \$220	= 0		
<input type="checkbox"/> Multiple Dependent Claim Presented					+ \$195	=	O R	+ \$390	= 0		
					<u>TOTAL</u>	= \$	O R	<u>TOTAL</u>	= \$0.00		

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

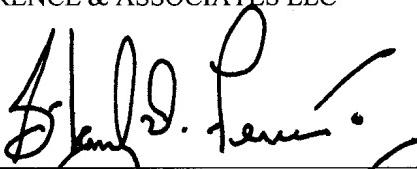
** If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space

*** If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8. Applicant encloses herewith a check for \$0.00 to cover the filing fee.
9. The Commissioner is hereby authorized to charge the \$0.00 filing fee to Deposit Account No. 50-0510.
10. The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510.

Respectfully submitted,

ERENCE & ASSOCIATES LLC

By 
Stanley D. Forence III
Reg. No. 35,879

Dated: January 16, 2009

Mailing Address:

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